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Bib Data Sheet

CONFIRMATION NO. 4995

<b>SERIAL NUMBER</b> 10/031,161	<b>FILING DATE</b> 05/20/2002 <b>RULE</b>	<b>CLASS</b> 601	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> PAA-101-A
<b>APPLICANTS</b> Nikolai Grigorievich Lyapko, Residence Not Provided;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/UA00/00022 07/13/2000				
<b>** FOREIGN APPLICATIONS *****</b> UKRAINE 99074081 07/15/1999				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 18
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Irving M Weiner Weiner & Burt PO Box 186 Harrisville ,MI 48740				
<b>TITLE</b> Applicator for use in reflexotherapy				
<b>FILING FEE RECEIVED</b> 650	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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<b>ADDRESS</b> Irving M Weiner Weiner & Burt PO Box 186 Harrisville ,MI 48740					
<b>TITLE</b> A DEVICE FOR REFLEXOTHERAPY					
<b>FILING FEE RECEIVED</b> 650	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		